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Borough of Shrewsbury

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1972

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"Shrewsbury is one of the most interesting spots that man ever beheld."

Willaim Cobbett
1762 – 1835
"Rural Rides"

Borough of Shrewsbury

THE HEALTH AND MARKETS COMMITTEE

Councillor A.H. Edwards (Chairman)

Alderman T.G. Ryder	Councillor S.G. Hay
Councillor B.C. Baldwin	Councillor F. Jones
Councillor E.T.B. Butcher	Councillor L. McDonald
Councillor G.E. Carder	Councillor T.S. Pritchard
Councillor S.B. Evans	

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

A.C. Mackenzie, M.D.,D.P.H.,M.F.C.M.

Senior Public Health Inspector

#* C. Stanley, Cert.R.S.I.

Additional Public Health Inspectors

* J. Innes, Cert.R.S.A.S.
* J.B. Jones, Cert.R.S.I.
* D.C. Joyce, Cert.R.S.I.
* D.A. Eaton, Dip.P.H.I.E.B.

Technical Assistant

L. Woodcock

Chief Clerk

F.R. Wootton

Clerk

Mrs. R.F. Owen

Abattoir Superintendent

* A.G. Hunter, Cert.P.H.I.E.B.

Assistant Meat Inspector

* J.T. Griffiths, Cert.P.H.I.E.B.

Authorised Meat Inspectors

L.T.C. Ellsmore
M. McDonough
P. McNally
R.F. Milner

PART-TIME OFFICERS

Meteorological Observer

A.S. Mumford

Public Analyst

R. Sinar, B.Pharm.,B.Sc.,M.Ph.A.,M.Chem.A.,F.P.S.,F.R.I.C.,A.Inst.W.P.C., P.A.I.W.E.

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* Qualified Meat Inspector.

# Smoke Inspector's Certificate of the Royal Sanitary Institute.

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HEALTH CENTRE,
MURIVANCE,
SHREWSBURY.

September 1973

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE
BOROUGH OF SHREWSBURY

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the health and sanitary circumstances of the Borough for the year 1972.

It might be thought that this report, judging from the low incidence of infectious diseases and low infant mortality rate etc., shows that the skills of the Medical Officer of Health and his staff will not be required after 1st April 1974, when the unification of the health service is to take place. Fortunately, it appears that some suitably trained medical manpower and the appropriate staff will be made available to the area authorities and district authorities to continue the work already showing such good dividends.

I include a brief history of the Public Health measures taken in Shrewsbury and hope that this will be of interest.

As your Medical Officer I have been fortunate in not having to deal with any serious outbreaks of infectious diseases and I have to thank the General Practitioners of the town and surrounding area for their co-operation when any infectious disease has had to be contained.

As Medical Referee to your Crematorium I find that the same co-operation and helpful attitude is evident. The smooth running of the Crematorium can be greatly upset by delays in submitting forms or by inattention to detail. I have to thank my Deputies for their most efficient help and advice, and hospital staff and general practitioners for their help.

I have to thank Mr. C. Stanley, Chief Public Health Inspector, Mr. Innes, his deputy, and the Public Health Inspectors, Mr. Woodcock, Technical Assistant, Mr. Hunter, Abattoir Superintendent, Mr. Griffiths, his deputy, and the staff at the Public Abattoir, and Mr. Wootton and Mrs. Owen in the office, for their efficient help, always cheerfully given.

I have the honour to be
Your obedient servant,

A.C. MACKENZIE.

GENERAL STATISTICS, 1972

Rateable Value of the Borough			£3,107,955
Sum represented by a Penny Rate (1p.)			£30,140
Area of the Borough (excluding water) in acres			9,317
Population (Registrar General's estimate, middle of 1972)			56,670
Persons per acre calculated on above population			6.08
Inhabited Houses (December 31st 1972)			19,472
	Male	*Female*	
Live Births: Legitimate	384	361	Total 803
Live Births: Illegitimate	33	25	
BIRTH RATE per 1,000 population			14.2
Stillbirths:			
Number			10
Rate per 1,000 total live and stillbirths			12.3
Total Live and Stillbirths			813
Deaths			675
DEATH RATE per 1,000 population			11.9
Infant Deaths (deaths under 1 year)			16
INFANT MORTALITY RATES:			
Total infant deaths per 1,000 total live births			19.9
Legitimate infant deaths per 1,000 legitimate live births			18.8
Illegitimate infant deaths per 1,000 illegitimate live births			34.5
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)			16.2
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)			14.9
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)			27.1
MATERNAL MORTALITY (including abortions)			
Number of deaths			Nil
Rate per 1,000 total live and stillbirths			Nil
Deaths from Cancer (all ages)			129
Deaths from Measles (all ages)			Nil
Deaths from Whooping Cough (all ages)			Nil
Deaths from Diarrhœa (under 2 years of age)			Nil

HISTORY

Early accounts of public health measures are not easily found but Dr. Taylor's MS, which covers the period 1372–1603, mentions –

1552–3 (I. Mary). Syr Addam Myttoon and Roger Lewys als' Pope Baylyffs. This yeare ..... the condyt in Shrosbery was begoon and wrought in woodden pypes.

1556–7 This yeare ..... the condyt in Shrosberie fynyshed and rann in iij placs in the says towne but it dyd not contynewe many yeares because the pypes were of wood and yll wrought.

In 1564 they began to brynge the condit water towards the towne in pypes of leade and in 1578–9 – "There was this yere ..... a guantitie of grownde purchased for the use of ye towne of Shrewsbery of Master Thomas Mackewoorthe of Betton gentilm' where the old head of the condit leadinge to Shrewsbery was and made a newe agayne with stone and coveryd with tymber because that the origynall wat' before was ope' althoughe banckyd aboute, year peoples cattell frequentyd in and troublyd the same wth other inconvenyances so the sayd p'cell of grounde being purchasyd there were sert' spryngs dyggyd and stonyd over and so coveryd upon wth yearthe havinge from them clere passage in pypes of leadd to the sayde headd neere by and soe passethe to Shrewsbery towne verey cleare and holsom wthout any hynderance or infect'on to ensue wch woorcke and ov'sight bothe of the saide springs and headd one Rychard Cardn' of Salop draper dyd tacke greate paynes".

It is presumed that the pipes were on or alongside the Welsh Bridge and that there were supply points from which the water was collected. Subsequently, street conduits or stand pipes – ornamental iron fountains with self-closing taps and gas heating to prevent freezing in winter – were placed in many of the town streets and the water – the official drinking water supply; very pure, hard and of excellent taste, was even piped into some houses. Until the introduction of the new river scheme at Shelton in 1935 these conduits were the town's only approved source of drinking water, but by this time the Severn water was being purified and was reasonably safe to drink. Waterworks and a brewery are shown on the riverside at the site of the Coton Hill Waterworks in the map of the Borough by H. Hitchcock in 1832.

River water was pumped into reservoirs in the town and piped into houses as a non-potable domestic supply. However, the limited availability of conduit water led many to drink river water which was heavily contaminated. Many people also drank well water, also contaminated.

About 1820 street sewers and house drains were being constructed and some of these early brick barrel sewers are still in use. The maintenance and cleansing of these sewers came under the control of the Corporation through the Trustees of the Streets Act. Power was also given to sweep and clean all public streets etc., but unfortunately many of the streets, passages and courts most in need of cleansing were private.

An outbreak of Cholera affecting much of England in 1831 resulted in the Central Board of Health being established and an Inspector, a Mr. Slaney, in 1835 and a Mr. Ranger in 1854 commented on the filthiness of the town generally.

Liverpool appointed Dr. F. Duncan Medical Officer of Health in 1847, and the City of London followed suit in the next year with the appointment of a Dr. Simon to a similar position. Other authorities throughout England gradually adopted the procedure.

The first Sanitary Report for the Borough of Shrewsbury, written by W.N. Thursfield, M.D., Medical Officer of Health, is dated March, 1875. The population was estimated at about 23,700 and the Medical Officer had at that time only just taken up office.

He wrote – "Before the completion of the projected house to house inspection of the Borough, a general report on its sanitary condition would be impossible; I will, therefore, content myself with drawing attention to certain salient points connected with the mortality returns." He mentions that 46% of the total deaths were those of people aged 70 years and upwards, and that there was surprisingly only one death from Scarletina inspite of there being several outbreaks and importations of the disease into the town. Smallpox had been imported into the Borough during the past year on one occasion, "but as the vaccination had been well looked up, it did not spread". A case of Typhus also, the most infectious of all fevers, was imported from Manchester, but was successfully isolated. However, during the year, there were 40 cases of enteric fever, with 7 deaths, and it was believed that at no time was the town entirely free from this fever. That there was no epidemic was due, the Medical Officer thought, to disinfecting the sewers.

Much of the report deals with the construction and ventilation of sewers, closets and cisterns communicating with water closets, and the supply of drinking water. River water at that time was little used for drinking — most of the town using contaminated well water. Conduit water was limited in its distribtuion. A plea is made for the river water to be filtered.

The second available report was made to the Council at its quarterly meeting on the 14th May 1877. In this year Maternal Mortality is first mentioned, and in which a density of 4.8 persons per inhabited house was mentioned as less than in the majority of large towns. The death rate under one year was 164 per 1,000 live births. The limitation of infectious diseases was one of the most important of the Medical Officer's tasks at that time and in 1876 there were 12 deaths from enteric fever, 26 from scarletina, 35 from measles, 2 from whooping cough, 26 from diarrhœa and 2 from fevers of doubtful kinds, and 3½ pages of the 17 page report are on this subject.

In 1878 there were an estimated 250 cases of generally mild typhoid fever with 20 deaths.

There was no Infectious Diseases hospital for isolation and treatment of infectious diseases at that time and the Medical Officer suggests in his report the taking over for this purpose of the Stone House, a building centrally situated and adjoining the Infirmary. "Such accommodation need by no means be gratuitous and sufferers would probably be found ready to avail themselves of it, while as infectious disease attacks people irrespective of rank or station, so an infectious hospital had seemed to me, regarded from a personal point of view, as common ground upon which all respectable people, unfortunate enough to be attacked with disease when from home, might meet."

In the report of 1881, Dr. Thursfield, C.S.Sc.,Camb., reports the infantile mortality to be 1 in 10 and a marked decrease in zymotic disease (21 deaths).

For the first few years of his appointment, Dr. Thursfield in his reports stuck to matters of sanitation and hygiene, the infectious diseases, maternal and infant mortality, birth and death rates, and it is interesting to note that only 26% of those dying in 1831 were over 60 years of age and that the number of births greatly exceeded the number of deaths:

1882 — 31 Births per 1,000 population.   Deaths 20.7
(1972 — 14.2 "   "   "   "   "   11.9)

The infant mortality and deaths in the first 10 years of life was extremely high and little was known of the treatment and control of the killer diseases of those days — tuberculosis, typhoid, pneumonia and, in children, diarrhœa and whooping cough.

The main activities of the Inspectors of the Department was in improving drainage from houses and in cleaning up the river and to this end all sewers were shut off from the upper reaches of the Severn and directed to flow towards the lower reaches i.e. the Monkmoor area.

However, it is interesting to see that in 1882 the Medical Officer of Health was attempting to have bad planning of the Post Office premises altered before the building was started and commenting with relish on what the place was like when his advice had not been taken. An outbreak of typhoid had occurred among the employees — seven cases being reported. "I inspected the arrangements and found them in practise even more objectionable than anticipated." He made several representations to the authorities by direction of the Sanitary Committee and commented — "up to the present time the only notice taken has been simple acknowledgement of the receipt of the letter".

Frustration must have been commonly felt by the early medical officers as year after year Dr. Thursfield asks for a hot air disinfecting chamber also a handcart and metalic box for the transport of infected articles.

In 1888 it was decided to pump water to the town from the river and the work of diverting sewage from the pumping site was completed. In the same report the danger of lead poisoning from piping soft upland surface water from the Stretton Hills to the town in lead pipes was mentioned.

About this time a 2 bed emergency Infectious Disease hospital was opened. Public baths were started and a mortuary building provided alongside the river.

The second Medical Officer of Health, Dr. Maurice Gepp, Diploma of Public Health, commenced duties in 1898 and had to report 31 deaths out of 129 cases of diphtheria. He made a plea for a disintecting station and 2 vans. "The cost of an efficient apparatus of suitable size for the needs of the Borough with boiler and drying apparatus need not exceed £150 in my opinion." (The opinion of the then Borough Engineer was not quoted.)

Things were moving fast in that year and a six bedded hospital was available for smallpox and cholera patients.

Plans to supply filtered river water failed to receive official sanction after exhaustive enquiries. A scheme to take water from the Long Mynd was excellent, the water good, but the expense was considered too high.

By 1900 the population was estimated at 26,969. By then, such good results were obtained in cleaning up the river and its banks, that the river was now a feature of Shrewsbury. A cast-iron tank of 30,000 gallons capacity was erected behind the High Street to store conduit water. This tank was recently demolished and is shown in the 1903 Ordnance Survey.

The first note of the Personal Health Services and Health Education is found in the report of 1905 where mention is made of the formation of a Health Society which appointed a trained and qualified Health Visitor, the Sanitary Committee paying part of her salary and also paying a fee to the Registrar for the supply of the weekly returns of Births, and these returns were made available to the Society. A card showing advice on feeding was prepared for distribution to mothers.

In 1908 the first School Medical Officer's report followed the 1907 Education Act.

Dr. Gebb retired in June 1908 and was succeeded by Dr. C.A. Reynolds, who stated in his first report that Council had approved the building of an isolation hospital, the setting up of a public slaughterhouse and the clarification of river water.

Monkmoor Hall was used as an infectious diseases hospital and eventually 15 beds were accommodated there. The 1908 report states that there were 225 cases of scarlet fever with 6 deaths, and 71 cases of diphtheria with 8 deaths. Cases of typhoid were common. In its first year the hospital's capacity was increased to 26 beds in which 191 cases of scarlet fever were nursed with four deaths. By this time the various diarrhœal diseases were being classified. Early text books indicate that the bacteriology of such diseases as meningitis, food poisoning, psittacosis, amoebic and bacillary dysentery was known.

In 1909 work on the installation of two Bells Pressure Filters was completed at Coton Hill Waterworks and as a result the water was markedly improved in clarity. Extensive bacteriological investigation eventually showed that this water when also treated with "Chloros" to give 0.5 p.p.m. of available chlorine, was safe for drinking purposes. However, conduit water was still available and was more popular and "tasty".

Inspection of factories, workshops and workplaces was added to the responsibilities of the Medical Officer of Health at this time.

Dr. Reynolds died in 1909 and Dr. Thomas Orr wrote the 1910 report. In this we find the first report of an infant mortality of less than 100 per 1,000 live births. Possibly the Notification of Briths Act, 1907, which came into force in 1909 gave more accurate figures. The good work of the Health Visitors and of the Shrewsbury Health Visiting Society must have been showing results by this time.

On housing Dr. Orr writes — "The high death-rate in Shrewsbury may, to a certain extent, be due to the bad housing conditions but it is also due in a great measure to the class of people living in the poorest districts. They are drawn from all over the county, the town being a centre for people who are on the tramp and who prefer a town life of laziness to one of toil in the country. In the slums we get many belonging to the very poor and thriftless class who. when they earn anything spend it mostly on drink."

1911 evidently was the first year in which no case of enteric fever was notified since the earliest records were kept. In this year poliomyelitis, cerebro-spinal fever and ophthalmia neontorium were made notifiable and tuberculosis registers had to be kept by local authorities. Shelters were provided for home open-air treatment of tuberculosis patients and beds were available at a sanatorium provided by the Shropshire Tuberculosis Association at Shirlett.

In the 1911 report it is noted that milk can be a vehicle for the spread of tuberculosis and loopholes existed in the regulations by which tuberculous milkers could be sold in the open market.

For some years the state of the slaughterhouses in the town and surrounding areas had given cause for concern and in 1911 a Public Abattoir was opened at Smithfield, all carcases being inspected by the Nuisance Inspector. The danger of spreading disease by unsound meat was thereby greatly lessened and the amount of nuisance caused by the multiplicity of small abattoirs reduced. The street cleansing methods, the tip sites, the keeping of pigs and fowls, common lodging houses, houses let in lodgings, (they were inhabited by a 'low and drunken class'), offensive trades, ice cream shops, smoke abatement, all kept the department staff busy and were duly mentioned in the report.

A diphtheria outbreak which occurred in 1912 was the second most severe on record — 110 cases with 16 deaths. The infectious disease hospital at Monkmoor Hall proved its worth.

Throughout the reports Dr. Orr pays tribute to the work of the Health Visitors and the Health Visiting Society which started a "school for mothers" at which talks and demonstrations on feeding and other household matters were given and at which encouragement was given to weigh children regularly.

Dr. Orr relinquished his appointment in August 1915 and was succeeded by Dr. James Fenton, M.D.,D.P.H., who mentions in his first report that the town was still handicapped for want of a steam disinfector and cleansing stations, especially as there were a lot of troops billeted in the town. Fortunately the infectious disease level appears to have been low.

The war years brought disruption to the department but meat inspection and the control of infectious diseases continued. In 1918 and 1919 influenza struck the town. The epidemic was in two waves — July to early August 1918, with 9 deaths from influenza, 2 from broncho pneumonia and 3 from pneumonia. The second wave started in October and continued until March 1919, with 130 deaths from influenza, 8 from broncho pneumonia and 20 from pneumonia. Deaths occurred at all ages. No idea of the number of cases is given in the reports but notifications of acute influenzal pneumonia from March 1919 to the end of the year totalled 100.

It is interesting to note that 47 cases of malaria were notified — all imported cases, the majority from Salonica, but no secondary infections seem to have occurred.

March 10th, 1919, saw the Borough take on the Child Welfare work so ably initiated by the Shrewsbury School for Mothers Committee, with the School Medical Officer as Medical Officer and Superintendent of the scheme. Dental treatment was to be given under the scheme, home helps to be enlisted, a supply of food and milk to be made available for necessitous cases. 461 first visits and 2,599 return visits and some home nursing were performed in 1919.

Dr. H. Gordon Smith became Medical Officer of Health in 1920. On the sanitary, as against the personal health service, side of the report of 1920, it is noted that plans were being made to adapt a block of buildings, used as a women's hostel in connection with the aerodrome at Monkmoor, for use as an infectious disease hospital. Also, that a steam disinfector had been bought (at long last) and was to be installed near the infectious disease hospital.

The 1921 report states that the Shrewsbury and Atcham Joint Isolation Board purchased the building and work commenced soon after and by 1922 there was accommodation for 30 patients.

The routine work of the department continued and in 1925 Dr. Gordon Smith left the town and Dr. A.D. Symons commenced his long term as Medical Officer of Health.

As a Health Educator, among other activities, he may well have been ahead of his time and his early annual reports contain pamphlets on such diverse subjects as "Advice to Expectant Mothers", "Cancer", "Air Pollution" and "Disinfection after Infectious Disease".

The 1927 annual report contains figures indicative of the housing picture in a survey showing 270 houses bad enough to require closing and 145 in a border-line position. This survey and a survey of the conditions in new Council houses indicated to Dr. Symons the need for a female housing manager whose duties would be social as well as supervisory. He said, "In the course of time she would become the welcome friend and not the prying Inspector, she would be the means of preventing avoidable expense in repairs, and she would improve the standard of health by teaching people to live more wholesomely and hence more happily".

In the same report Dr. Symons voices an opinion on the advisability of the Borough running a crematorium.

In 1928 the Health Department expanded and moved to its present quarters in Town Walls.

In 1929 the chief event noted was the opening of a Climatological Station at Monkmoor Hospital, this being recognised by and providing information to the Meteorological Office.

1930 was the year when an outbreak of arsenical poisoning had to be investigated and cleared. Twenty-seven persons were affected and the arsenic was traced to sweets.

Plans for a move from Coton Hill further up stream to Shelton for the Waterworks were being made and from 1931 the New Works were situated at Shelton.

The 1933 report was the last given before the enlargement brought about by the Boundary Commission in 1934 and it is worth noting that the population had grown from 22,025 in 1861 to 33,220, mainly as a result of the industrial revolution. The infant mortality rate had fallen from 164 or higher to 44. The deaths from infectious diseases had come tumbling down and no case of diphtheria or enteric fever had occurred during the year. Mention is made of the danger to health from atmospheric pollution and the report states – "In all probability little real improvement will take place until the law forbids the burning of raw coal,and there is some hope that when the extraction of oil and petrol from coal becomes a commercial proposition, as it may do in the near future, legislation may be passed to give effect to this desirable reform. In the meantime while local authorities can set an example and contribute to the cleanliness of the air, if in their various departments, offices and elementary schools they made use of electricity, gas or smokeless fuel." The report continues – "The Health Department uses only smokeless fuel and electricity."

1933 was the first year in which no case of diphtheria was registered in the town. Also, in this report, is an enthusiastic mention of the possibility of making a "spa" in the town at Abbey Gardens using the well-known Sutton spring water, described as a "chalybdate saline water with traces of sulphur, bromide and iron, useful for the costive hypochondriac, sufferers from chronic diseases of the skin as well as the anaemic". The matter was evidently not pursued with favour.

The Shelton Water Scheme came into operation in August 1935, the capacity of this scheme catering for a population of 40,000 with a maximum capacity of two million gallons per day. By the end of the mid-sixties the water works capacity was exceeded and reconstruction from 1966 to 1971 brought the capacity up to eight and one half million gallons per day. River water is now the only supply to the town as the Conduit water became suspect in 1938 and the Conduit system gradually gave way to the river water supply. The Conduit system was eventually adandoned in 1947.

Slum clearance in the town centre, which not only provided space for an inner loop road and bus station but also enabled two of the oldest houses of their types to be seen and appreciated, was undertaken in the 1930's. The two houses, Rowley's House, built approximately 1550, and Rowley's Mansion, built 1618, have subsequently been bought by the Corporation. As a lodging house had been demolished and it was apparent that a number of working men had to be rendered homeless by the clearance, the Corporation decided to buy and convert into a hostel a school building in Ditherington. The Derfald Hostel, which originally catered for working men and a few "tramps" or vagrants, was opened in 1937 and is still in use today. The long awaited steam disinfaction plant was provided in the grounds of the hostel and functioned until 1970.

Mention is made in the 1939 report of the sudden rise in the number of children immunised against diphtheria. A Government campaign was launched at the beginning of the year when the population as a whole were getting used to having to pay attention to Government instructions. Preparations were made to cope with the increased number of infectious illness that the arrival of evacuees would bring. The additional 50 beds provided were not required until after the commencement of hostilities, but 1940 proved to be be year in which the infectious diseases seemed to have been very prevalent, with 105 cases of diphtheria and 5 deaths, 8 children previously immunised all had mild attacks, 7 cases of enteric fever, 77 scarlet fever cases and 24 cases of cerebro spinal fever with 4 deaths. During the year all the emergency beds in Monkmoor Hall were used.

In the introduction to the 1944 report, Dr. Symons forecasts the high proportion of elderly in the populace, some of whom he thought might well be housed in small hostels. He said, "I envisage, therefore, small hostels and not large soulless institutions, in which elderly people can have their own private bed-sitting room adorned with cherished personal possessions, a communal dining room as well as a sitting room where chatting and knitting can be contemporaneous and, apart from the domestic staff to do the catering, cooking and heavier cleaning, there might be a resident or daily visiting nurse who could listen to the tales of aches and pains and attend to minor maladies. Surely such a place small enough to feel homely and yet providing privacy as well as social opportunities would, without too many rules or regulations, be a godsend to those who now live alone and often in anxiety as to what is to become of them some day." The introduction concludes, "It might well be that hostels could be set up, not in the suburbs, but in the more central parts of the town on sites cleared of worn out houses."

Also in this report, "Precautions against Contamination of Food" figured in larger capitals for the first time and a drive towards clean food is evident from a list of defects found and remedied during the year in hotels, restaurants and bakehouses.

The National Health Service Bill received comment in the 1945 annual report. Dr. Symons considered that the service would be a National "Sickness" service and commented on the impact on the community of so called progress as shown by the increase oı mental illness and the decrease in general moral standards and concludes his introduction — "England may yet regain her health and her soul, for at present she is spiritually sick, and when decency, culture and responsibility oust moral degeneracy, the material outlook and individual irresponsibility, then may we hope for a happier and a healthier people than at present."

By this time the war being over much attention was given to housing. There was a lot of overcrowding in the town with 1,262 housing applications (23 with 4 or more children) from families in rooms, Internal rearrangement led to the setting up in 1946 of a department for management (lettings, repairs, etc.) of Council housing and a start was made to relieve overcrowding by the erection of 100 aluminium prefabricated bungalows. In 1946 there were 1,681 families in rooms on the waiting list. The building of houses by the Corporation went ahead with considerable momentum but was overtaken as far as numbers were concerned by private building in the middle 1950's.

The appointed day (5th July, 1948) saw the transfer of Child Health, School Health and Health Education to the County Council and the fever hospital to the hospital service, but environmental health functions were left with the Borough and Dr. Symons points out in his reports the importance of constant vigilance against outbreaks of the infectious diseases. Anterior Poliomeylitis or "Polio", an acute infectious illness, was at this time spreading throughout Britain and Shrewsbury had 5 deaths from this disease in 1947. Apart from that year Shrewsbury had relatively few cases of poliomyelitis.

On the "social" side there is comment in the 1949 report of the setting up of a local Old People's Welfare Committee to study the needs of old people and to promote measures for their well-being.

After Dr. Symons' death in August 1951 the appointment of his successor, Dr. Kenneth Hay, was as a part-time Borough Medical Officer of Health and part-time Assistant County Medical Officer. Dr. Hay held the appointment for less than a year and was succeeded by Dr. P.G. Roads. In annual reports after 1951 the emphasis was on environmental health. The incidence of the notifiable infectious diseases, food hygiene and housing are seen to be subjects of importance. A survey in 1950–51 showed that an estimated 800 houses should be demolished or closed in the next 10 years. In 1954, the Chief Public Health Inspector, Mr. C. Stanley, wrote — "Housing, food hygiene and smoke abatement were amongst the most discussed health topics of 1954, both in the national press and at conferences held in various parts of the country." Measures to maintain property as well as the clearance of unfit property were promulgated about this time in the Housing Repairs and Rents Act, 1954, the Food and Drugs Act, 1955, the Food Hygiene Regulations, 1955 and the Clean Air Act, 1956.

In 1962/63 the longest cold spell — from the 22nd December, 1962 to the 4th March, 1963 — for many years was recorded with pipes frozen three feet underground, the River Severn frozen over and temperatures constantly well below freezing. The Water Engineer commented in my report of 1963 as follows — "De-frosting communication and service pipes by electrical methods, commenced soon after Christmas, and two teams were in operation, working very long hours. One team operated in the town centre and dealt with large establishments such as food stores where it was essential that water be available from a public health point of view, and the second team operated on the outskirts. Priority was given to essential users such as doctors, dentists, etc., and also to pregnant women having their babies at home and to houses where there was sickness or old people", and the Borough Surveyor's records showed that 3,750 Corporation houses were affected with from 1 to 33 bursts per house, with an average of 8, not necessarily occurring at one time. In some cases the family 'abandoned ship' and the whole place froze solid and subsequently practically every pipe, tank and cistern in the house burst. Fuel generally was in short supply but no epidemic occurred nor were there any deaths from pneumonia.

Freedom from noise — another form of air pollution — is also considered to be a health service and Council can use the powers of the Noise Abatement Act, 1960 to deal with the production of noise or vibration sufficient to be a nuisance as a statutory offence.

The Offices, Shops and Railway Premises Act, 1963, effective from July 1966, and probably the most important health Act of the decade, is roughly the equivalent for the "white collar" worker to the Factory Act. Its effects are shown in analysis over the years of unsatisfactory conditions remedied and noted on inspection. In 1967 they numbered 1,400 and included 258 defective floors and staircases, 134 cases of lack of cleanliness and 250 inadequate or unsatisfactory sanitary accommodation. The Act affects about 7,000 employees.

On food hygiene the various regulations and codes of practice have given Public Health Inspectors guidance on the standards to be expected as well as the powers to prosecute where necessary, and a drive was made to improve food hygiene; with inspections of premises leading to suggestions or, if necessary, legislation to improve them, and lectures, films and other publicity, including the now accepted "Now Wash Your Hands" notice.

Since that time there have been minimal changes in legislation but since then many changes in feeding practices and food marketing have taken place (deep freezing, convenience packaging) many of which cause other dangers for the inspectorate to combat.

On housing, the clearance of 800 houses mentioned above proceeded using the clearance area procedure where a good sized area was available and the "notice of time and place" procedure for individual houses.

The Corporation built their first centrally heated bungalows in 1964 and their first grouped dwelling scheme in 1958. This consisted of 16 bungalows grouped round a central block consisting of a common room, kitchen, spare bedroom and warden's accommodation.

Further housing surveys have been made since and by 1972 1,285 houses, unfit for human habitation, have been dealt with. There are 335 houses at present which it is considered should be represented as unfit within the next 5 years. A housing improvement area was established in 1966, with modernisation by means of a grant being shown to the public in 2 demonstration houses. A super project of housing was commenced in 1968. This is the Castlefields Development Scheme; a pioneer effort. The progress of this scheme has not been rapid but new houses are now becoming available and the clearance of the 200 unfit properties in the area is nearly complete.

Mention has been made of the Municipal Abattoir in the centre of the town. In the mid-Fifties it was realised that such a building with its attendant trades should be moved from the centre of the town on amenity as well as health grounds, and in the early 1960's plans for a new abattoir adjacent to the New Cattle Market were being made. This abattoir opened in 1964 and was found by 1968 to be out-of-date. More hygienic preparation and the advantages of chilling in improving the keeping quality added to the prospects of a large meat packing establishment being built on an adjacent site led to considerable improvements in the abattoir. These were carried out in 1968 and resulted in a greatly increased potential throughput, but a diminution in the hanging space, so that the cooling and refrigeration capacity of the factory is adequate for one half of the throughput to be taken there, but that of the abattoir is insufficient for other customers to put large orders through. The abattoir is one of the country's "top 10" as far as hygiene and dressing is concerned and an export licence is held so that meat can be exported to European Economic Community Countries.

Air pollution was studied following several winters in which smog caused high death rates in humans, and the Clean Air Act, 1956 followed closely on the Beaver Report. After much consideration of facts and figures the first smoke control area was recommended to Council in 1959 and the area was approved in 1961 and functional from 1962. Measurements of smoke and SO_2 content showed three or four times the amount of pollution in November and December than in the summer months, pointing to domestic heating as the chief source of pollution.

The fight to eradicate or at least control the infectious diseases has continued alongside these other activities and campaigns to immunise against diphtheria, whooping cough, poliomyelitis and tuberculosis have shown good results too well-known to require the quotation of statistics. The more recent against measles and the possible effect of maternal rubella on unborn children will no doubt show their effectiveness in time.

In the meantime, we have an ageing population — less of a problem in this town than in seaside towns, but still requiring special housing, social services and hospital care.

An interesting exercise recently undertaken in assessing the needs of the elderly in the population in sickness and in their ordinary day-to-day activities showed that, at present, the elderly seem to have a one-third chance of dying at home and a two-thirds chance of dying in hospital or welfare home and it showed also the large proportion of women compared to men in the over 75 age group.

Table A below shows an analysis of the 474 deaths over 64 by age and sex and table B the separation into deaths at their own or relatives homes, in hospital, or other 'institutional' accommodation.

TABLE A

	Age 65-70	Age 70-75	Age 75-80	Age 80+	
Male	55 (24%)	80 (35%)	45 (20%)	47 (21%)	227 (100%)
Female	34 (14%)	42 (17%)	56 (22%)	115 (47%)	247 (100%)

TABLE B

DEATH IN:	Age 65-70	Age 70-75	Age 75-80	Age 80+
Male				
Home	16	24	10	14
Hospital	39	52	35	32
Institution, etc.	—	4	—	1
Female				
Home	5	15	23	35
Hospital	29	27	33	75
Institution, etc.	—	—	—	5

This survey of the health and amenity of the Borough of Shrewsbury over the last 98 years leaves an unfinished story. Who will write the next chapters?

WEATHER CONDITIONS

As in the past forty-three years, daily readings and weather recordings have been continued at the Climatological Station, which is approved by the Air Ministry and is now situated at Monkmoor Sewage Works.

The particulars regarding 1972 may be summarised as follows:

Rainfall – The total rainfall was 25.16 inches (639.1 millimetres), compared with 23.91 inches, 24.63 inches and 26.55 inches in the previous years respectively.

The average rainfall over the last 43 years was 25.96 inches.

Sunshine – The number of hours of bright sunshine recorded was 1,225.9 hours, compared with 1,432.7 hours, 1,439.7 hours and 1,328.4 hours in the previous years respectively.

The average sunshine over the last 43 years was 1,346.4 hours.

Temperatures – Warmest Day (Highest Shade Maximum) July 20th, 26.1°C.
Warmest Night (Highest Shade Minimum) July 6th, 15.2°C.
Coldest Day (Lowest Shade Maximum) January 29th, 1.2°C.
Coldest Night (Lowest Shade Minimum) January –8.8°C.

WEATHER STATISTICS – SHREWSBURY 1972

Month	Mean Barometric Pressure in inches	*Air Temperature in Shade °C*					*Sunshine in Hours*			*Rainfall in Millimetres*		
		Mean Maximum	*Highest Maximum and Date*	*Mean Minimum*	*Lowest Maximum and Date*	*Mean Temperatures*	*Most Sunshine in One Day*	*Daily Means*	*Total Hours*	*No. of Rainy Days*	*Greatest Fall in One Day*	*Total Rainfall*
Jan.	29.890	6.5	11.1 on 11th	1.0	–8.8 on 31st	3.7	6.6 on 21st	1.30	40.3	20	9.2 on 23rd	67.7
Feb.	29.744	6.4	9.3 on 14th	1.5	–5.0 on 1st	4.0	7.4 on 4th	1.47	42.8	19	9.2 on 3rd	43.6
Mar.	29.912	10.0	17.5 on 19th	2.3	–1.5 on 13th and 22nd	6.1	10.3 on 24th	3.60	111.6	19	8.6 on 31st	50.0
Apr.	29.912	11.9	14.5 on 1st	4.8	–0.3 on 20th	8.3	10.7 on 25th	4.58	137.6	15	5.2 on 6th	30.5
May	29.902	14.4	17.9 on 22nd	6.3	2.0 on 17th	10.3	10.0 on 17th	4.18	129.8	22	10.0 on 2nd	57.9
June	29.912	15.5	19.9 on 16th	8.0	4.1 on 2nd	11.7	10.5 on 14th	4.35	130.6	20	7.6 on 9th	59.1
July	30.126	19.8	26.1 on 20th	11.0	7.6 on 6th	15.4	14.7 on 17th	5.08	157.7	15	23.2 on 22nd	83.3
Aug.	30.145	19.1	21.9 on 13th	10.8	3.7 on 11th	14.9	13.5 on 21st	5.50	170.6	10	9.9 on 1st	32.8
Sept,	30.257	15.7	21.7 on 2nd	6.6	2.0 on 15th, 21st & 26th	11.1	8.7 on 10th	3.69	110.9	5	28.8 on 8th	40.7
Oct.	30.140	13.8	18.0 on 8th	6.0	–1.9 on 21st	9.9	8.7 on 20th	2.40	74.6	8	37.7 on 9th	56.6
Nov.	29.969	9.9	16.6 on 16th	3.4	–3.7 on 25th	6.6	7.8 on 15th	2.83	85.1	21	8.6 on 12th	37.7
Dec.	29.974	8.3	13.7 on 12th	2.8	–1.2 on 21st	5.5	6.1 on 3rd	1.10	34.3	16	13.0 on 5th	79.2
									1,225.9			639.1

VITAL STATISTICS
1972 AND PREVIOUS DECADE

Year	Population (estimated) each year by Registrar General	Births		Deaths				
				Under 1 Year of Age		At All Ages		
		Number	Rate per 1,000 Population	Number	Infant Mortality Rate per 1,000 Births	Number	Rate	
							Crude	Adjusted
1962	50,120	869	17.3	23	26	602	12.0	12.6
1963	50,710	902	17.8	12	13	627	12.3	12.8
1964	51,130	962	18.8	17	18	579	11.3	11.7
1965	51,670	949	18.4	23	24	591	11.4	11.3
1966	52,450	898	17.1	12	13	641	12.2	12.2
1967	53,870	947	17.6	24	25	573	10.7	10.6
1968	53,760	949	17.7	20	21	692	12.9	12.9
1969	54,190	880	16.2	20	23	632	11.7	11.8
1970	54,310	904	16.6	11	12	651	12.0	12.2
1971	56,630	878	15.5	10	11	648	11.4	11.6
1972	56,670	803	14.2	16	20	675	11.9	12.0

POPULATION

The Registrar General's estimate of the home population of Shrewsbury for 1972, including members of the armed forces stationed in the area, was 56,670 compared with 56,630 in the previous year.

BIRTHS

The number of live births in 1972 was 803, compared with 878, 904 and 880 in the previous years respectively.

The crude birth rate was 14.2 per 1,000 population, compared with 15.5, 16.6 and 16.2 in the previous years respectively.

Applying the comparability factor provided by the Registrar General, the adjusted birth rate becomes 13.8.

The 803 births may be analysed as follows:

	Legitimate	Illegitimate	
Male	384	33	803
Female	361	25	

A comparison of the adjusted birth rate between Shrewsbury and the rate for England and Wales is as follows:

	Rate per 1,000 Population Live Births
England and Wales	14.8
Shrewsbury	13.8

Illegitimate Births

There were 58 illegitimate births, compared with 51, 63 and 56 in the previous years respectively.

The illegitimate birth rate was 1.02 per 1,000 population, illegitimate births being a percentage of 7 of the total live births.

Stillbirths

There were 10 stillbirths, compared with 17, 15 and 18 in the previous years respectively.

The stillbirth rate was .18 per 1,000 population, the stillbirths being a percentage of 1.2 of the total births.

CAUSES OF AND AGES AT DEATH DURING THE YEAR 1972

CAUSES OF DEATH	NET DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT												
	Male	Female	Under 4 weeks	4 weeks and under 1 year	1–	5–	15–	25–	35–	45–	55–	65–	75 and over
	335	340	13	3	9	1	3	4	11	39	118	189	285
Enteritis and other Diarrhœal Diseases	1	1	–	–	–	–	–	1	–	–	1	–	–
Malignant Neoplasm Buccal Cavity, etc.	2	1	–	–	–	–	–	–	–	–	2	–	1
Malignant Neoplasm Oesophagus	1	2	–	–	–	–	–	–	–	–	–	1	2
Malignant Neoplasm Stomach	11	6	–	–	–	–	–	–	–	1	4	4	8
Malignant Neoplasm Intestine	16	10	–	–	–	–	–	–	–	3	5	10	8
Malignant Neoplasm Lung, Bronchus	21	5	–	–	–	–	–	–	–	2	12	10	2
Malignant Neoplasm Breast	–	16	–	–	–	–	–	1	–	1	7	4	3
Malignant Neoplasm Uterus	–	8	–	–	–	–	–	–	1	2	1	1	3
Malignant Neoplasm Prostrate	5	–	–	–	–	–	–	–	–	–	1	1	3
Leukaemia	1	2	–	–	–	–	–	–	–	–	–	1	2
Other Malignant Neoplasms	10	15	–	–	–	–	–	–	2	2	4	11	6
Diabetes Mellitus	3	1	–	–	–	–	1	–	–	1	–	1	1
Anaemia	1	–	–	–	–	–	–	–	–	–	–	–	1
Mental Disorders	–	1	–	–	–	–	–	–	–	–	–	–	1
Meningitis	–	1	–	–	–	–	–	–	–	–	–	–	1
Multiple Sclerosis	–	1	–	–	–	–	–	–	–	–	1	–	–
Other Diseases of Nervous System, etc.	2	3	–	–	2	–	–	–	–	–	–	2	1
Chronic Rheumatic Heart Disease	2	2	–	–	–	–	–	–	–	1	1	2	–
Hypertensive Disease	5	5	–	–	–	–	–	–	–	–	3	3	4
Ischaemic Heart Disease	92	77	–	–	–	–	–	1	2	15	23	60	68
Other Forms of Heart Disease	15	30	–	–	–	–	–	1	–	–	8	8	28
Cerebrovascular Disease	43	50	–	–	–	–	–	–	–	2	17	22	52
Other Diseases of Circulatory System	14	11	–	–	–	–	1	–	1	1	2	9	11
Influenza	–	6	–	–	–	–	–	–	–	–	2	2	2
Pneumonia	29	33	–	–	1	–	–	–	2	2	8	9	40
Bronchitis and Emphysema	21	10	–	–	1	–	–	–	–	1	7	11	11
Asthma	1	1	–	–	–	–	–	–	–	–	–	1	1
Other Diseases of Respiratory System	1	2	–	–	–	–	–	–	–	–	–	2	1
Peptic Ulcer	5	4	–	–	–	–	–	–	–	2	1	2	4
Intestinal Obstruction and Hernia	–	2	–	–	–	–	–	–	–	–	1	–	1
Cirrhosis of Liver	2	–	–	–	–	–	–	–	1	–	–	1	–
Other Diseases of Digestive System	1	7	–	–	–	–	–	–	1	–	1	–	6
Nephritis and Nephrosis	4	1	–	–	–	–	–	–	–	1	1	2	1
Other Diseases, Genito-Urinary System	2	7	–	–	–	–	–	–	–	–	2	3	4
Diseases of Skin, Subcutaneous Tissue	1	–	–	–	–	–	–	–	–	–	–	1	–
Diseases of Musculo-Skelital System	1	3	–	–	–	–	–	–	–	–	–	1	3
Congenital Anomalies	3	3	2	2	1	–	–	–	–	–	1	–	–
Birth Injury, Difficult Labour, etc.	5	4	9	–	–	–	–	–	–	–	–	–	–
Other Causes of Perinatal Mortality	–	2	2	–	–	–	–	–	–	–	–	–	–
Symptoms and Ill-Defined Conditions	1	1	–	–	1	–	–	–	–	–	–	1	–
Motor Vehicle Accidents	9	1	–	1	2	1	1	–	–	2	1	1	1
All Other Accidents	3	3	–	–	1	–	–	–	–	–	–	2	3
Suicide and Self-Inflicted Injuries	1	1	–	–	–	–	–	–	–	–	1	–	1
All Other External Causes	–	1	–	–	–	–	–	–	1	–	–	–	–

DEATHS

The number of deaths during the year was 675, compared with 648, 651 and 632 in the previous years respectively.

Of the 675 deaths, 335 were males and 340 females.

The crude death rate was 11.9 and, by applying the comparability factor provided by the Registrar General, the adjusted rate was 12.0.

A comparison between the adjusted death rate of Shrewsbury and the rate for England and Wales is as follows:

	Death Rate per 1,000 Population
England and Wales	12.1
Shrewsbury	12.0

Of the 675 deaths, 474 persons were 65 years of age or over, i.e. 70.3%.

If the main causes of death are grouped, it will be seen that 582 of the 675 deaths can be allocated to four groups as follows:

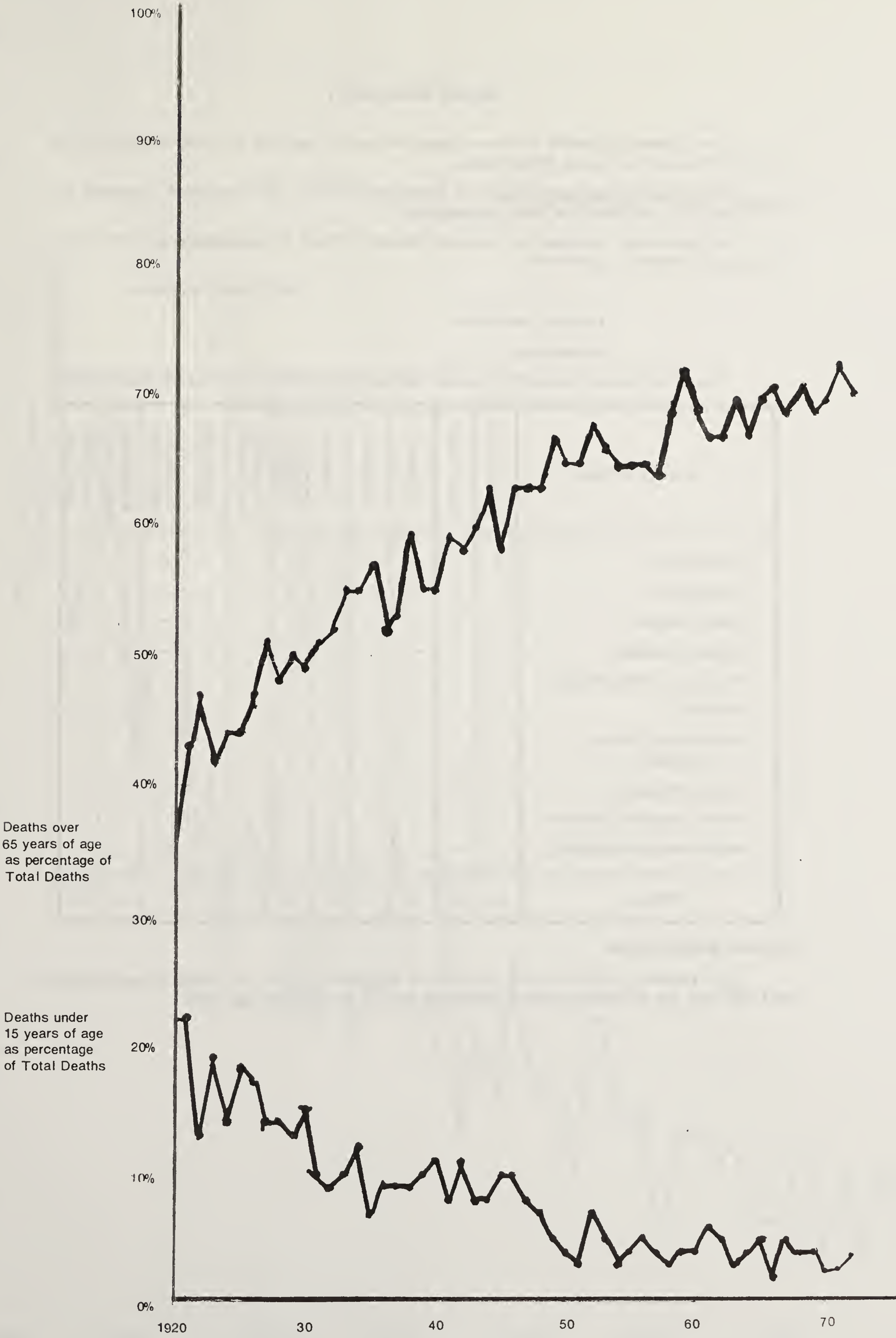
1.	Heart disease	228
2.	Other diseases of the Circulatory System	118
3.	Cancer (including Leukaemia	132
4.	Bronchitis, Pneumonia and other Respiratory Disease, including Pulmonary Tuberculosis	104

There were 2 deaths from suicide and self-inflicted injuries and 10 from motor vehicle accidents.

Of the child population, there were 16 infant deaths (under one year of age) and 10 deaths of children one to fourteen years of age.

Of the 159 deaths in the 15—65 age groups, the working years, it is pleasing to note that only 14 deaths from lung cancer were recorded, although there were 79 deaths from heart and circulatory diseases, including cerebrovascular diseases in these age groups. The incidence of coronary disease is apparently increasing throughout England and Wales. Of the factors thought to be causative, rush, hurry and tension do not appear to be predominent in Shrewsbury, and the water is not ‘‘soft’’.

A very small decrease in accidental deaths and suicides is noted.


100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
Deaths over
65 years of age
as percentage of
Total Deaths
Deaths under
15 years of age
as percentage
of Total Deaths
1920
30
40
50
60
70

INFANT MORTALITY

The number of deaths in infants under one year of age was 16, compared with 11, 20 and 20 in the previous years respectively.

The Infantile Mortality Rate was accordingly 20 per 1,000 live births, compared with 12, 23 and 21 in the previous years respectively.

A comparison between the Infantile Mortality Rate of Shrewsbury and the rate for England and Wales is as follows:

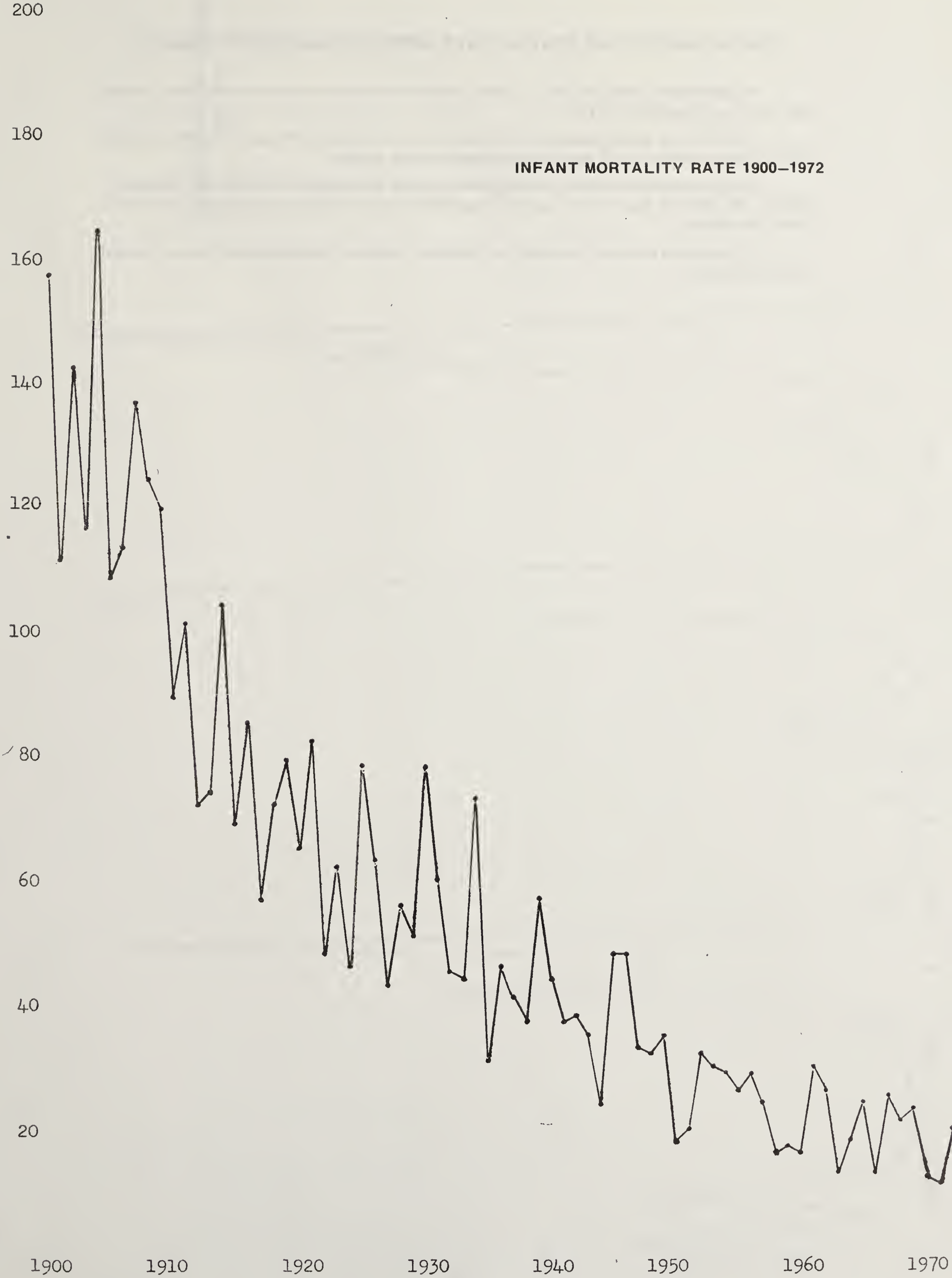
	Per 1,000 Live Births
England and Wales	17
Shrewsbury	20

These deaths are analysed by causes and duration of life in the accompanying table.

Causes of Death	Under 24 hours	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total Under 1 month	1 month and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under 1 year
Prematurity	2	–	–	–	–	2	–	–	–	–	2
Atelectasis	2	1	–	–	–	3	–	–	–	–	3
Heart Disease	–	1	–	–	–	1	–	1	–	–	2
Cerebral Damage	1	1	–	–	–	2	–	–	–	–	2
Pulmonary Haemorrhage	–	–	1	–	–	1	–	–	–	–	1
Asphyxia	2	–	–	–	–	2	–	–	–	–	2
Respiratory Distress Syndrome	1	–	–	–	–	1	–	–	–	–	1
Bronchopneumonia	–	1	–	–	–	1	–	–	–	–	1
Other Congenital Defects	–	–	1	–	–	1	–	–	–	–	1
Motor Vehicle Accidents	–	–	–	–	–	–	–	–	1	–	1
TOTAL	8	4	2	–	–	14	–	1	1	–	16

Perinatal Mortality Rate

The perinatal mortality rate (stillbirths and deaths under one week of age combined per 1,000 live and stillbirths) was 27 compared with 22 for England and Wales.



INFANT MORTALITY RATE 1900–1972

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

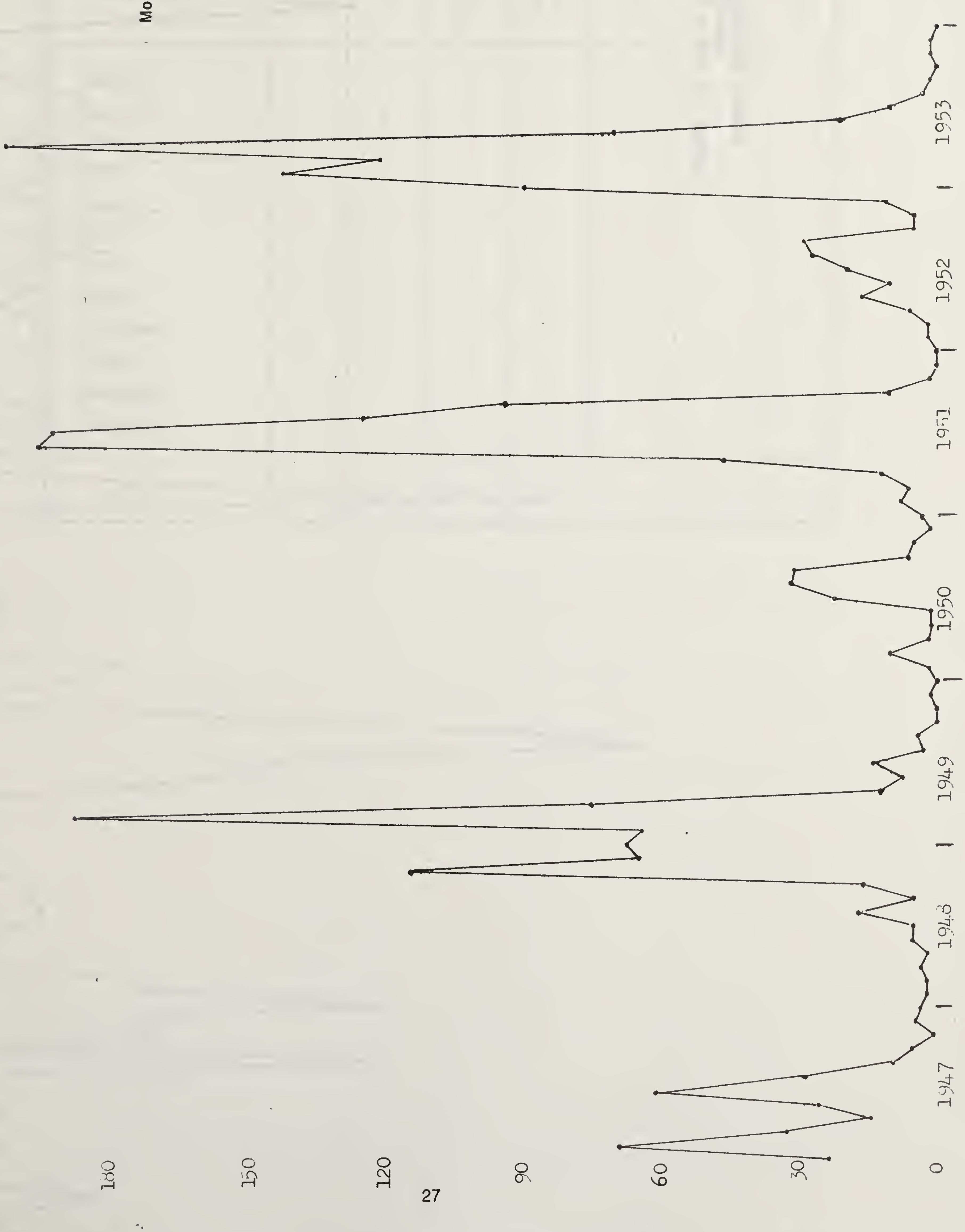
As can be seen from the table on page 29 the incidence of notifiable infectious disease was very low throughout the year.

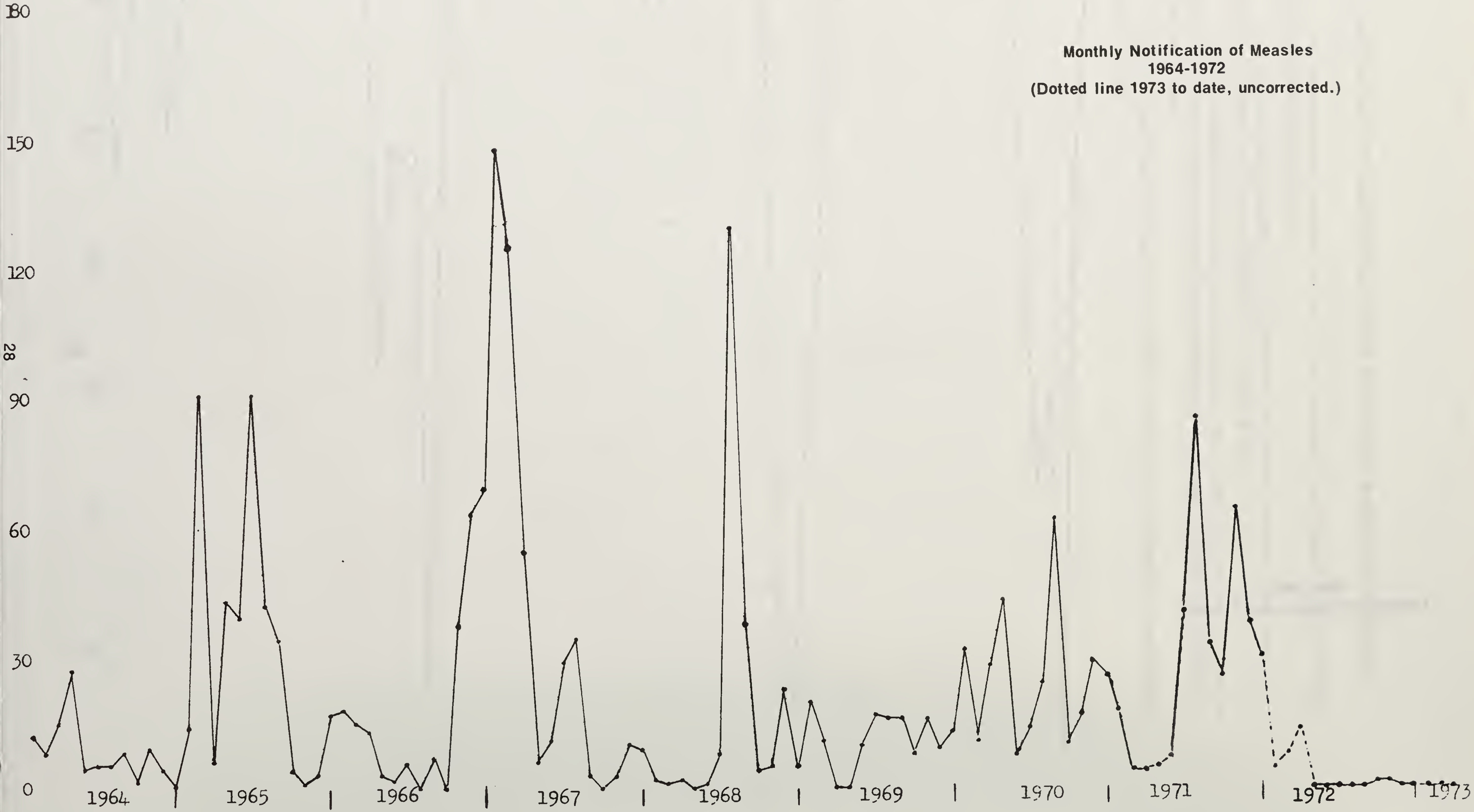
The 1971–72 winter epidemic of influenza was not severe, although 6 deaths are attributed to this disease, all of whom were 55 years of age or over.

Of the pneumonia deaths, although the numbers were higher than last year, 40 were in persons 75 years of age or more and the pneumonia may have been the terminal incident of a failing resistance.

It is pleasing to see Nil returns for diphtheria, smallpox and the enteric fevers (typhoid and paratyphoid).

Monthly Notification of Measles
1947-1953





Monthly Notification of Measles
1964-1972
(Dotted line 1973 to date, uncorrected.)

MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES, 1972

(EXCLUDING TUBERCULOSIS)

MONTH	Scarlet Fever	Measles	Whooping Cough	Infective Jaundice	Dysentery	Acute Meningitis	Food Poisoning
January	—	4	—	—	—	—	—
February	—	8	—	—	1	1	2
March	—	13	—	—	—	—	—
April	—	—	—	—	—	—	—
May	—	—	—	—	—	—	—
June	1	—	—	—	—	—	—
July	—	—	—	1	—	—	—
August	—	—	1	—	—	—	—
September	—	1	—	—	—	—	—
October	1	1	—	—	—	—	—
November	—	—	—	—	—	—	—
December	—	—	—	—	—	1	—
TOTAL	2	27	1	1	1	2	2

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1972

NOTIFIABLE DISEASE	Number of Cases Notified											Total Cases Removed to Hospital
	At All Ages	At Ages – Years									Age Unkown	
		Under 1	1 to 2	3 to 4	5 to 9	10 to 14	15 to 24	25 to 44	45 to 64	65 and upwards		
Measles	27	–	7	6	14	–	–	–	–	–	–	–
Dysentery	1	–	–	–	–	1	–	–	–	–	–	–
Scarlet Fever	2	–	–	1	1	–	–	–	–	–	–	–
Whooping Cough	1	1	–	–	–	–	–	–	–	–	–	1
Infective Jaundice	1	–	–	–	–	–	–	1	–	–	–	–
Diphtheria	–	–	–	–	–	–	–	–	–	–	–	–
Tetanus	–	–	–	–	–	–	–	–	–	–	–	–
Acute Meningitis	2	–	–	–	1	1	–	–	–	–	–	2
Acute Encephalitis:												
Infective	–	–	–	–	–	–	–	–	–	–	–	–
Post Infectious	–	–	–	–	–	–	–	–	–	–	–	–
Ophthalmia Neonatorum	–	–	–	–	–	–	–	–	–	–	–	–
Acute Poliomyelitis:												
Paralytic	–	–	–	–	–	–	–	–	–	–	–	–
Non-Paralytic	–	–	–	–	–	–	–	–	–	–	–	–
Letospirosis	–	–	–	–	–	–	–	–	–	–	–	–
Paratyphoid Fever	–	–	–	–	–	–	–	–	–	–	–	–
Typhoid Fever	–	–	–	–	–	–	–	–	–	–	–	–
Food Poisoning	2	1	1	–	–	–	–	–	–	–	–	–
Malaria	–	–	–	–	–	–	–	–	–	–	–	–
Plague	–	–	–	–	–	–	–	–	–	–	–	–
Cholera	–	–	–	–	–	–	–	–	–	–	–	–
Anthrax	–	–	–	–	–	–	–	–	–	–	–	–
Smallpox	–	–	–	–	–	–	–	–	–	–	–	–
Typhus Fever	–	–	–	–	–	–	–	–	–	–	–	–
Relapsing Fever	–	–	–	–	–	–	–	–	–	–	–	–
Yellow Fever	–	–	–	–	–	–	–	–	–	–	–	–
TOTALS	36	2	8	7	16	2	–	1	–	–	–	3

TUBERCULOSIS

AGE PERIODS	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	–	–	–	–	–	–	–	–
1 year	–	–	–	–	–	–	–	–
2–4 years	–	–	–	–	–	–	–	–
5–9 years	–	–	–	–	–	–	–	–
10–14 years	–	–	–	–	–	–	–	–
15–19 years	–	–	–	–	–	–	–	–
20–24 years	–	–	–	–	–	–	–	–
25–34 years	–	–	–	1	–	–	–	–
35–44 years	–	–	–	–	–	–	–	–
45–54 years	1	–	–	–	–	–	–	–
55–64 years	–	–	–	–	–	–	–	–
65–74 years	–	–	–	–	–	–	–	–
75 and over	–	–	–	–	–	–	–	–
TOTALS	1	–	–	1	–	–	–	–

The Phthisis (Respiratory or Pulmonary Tuberculosis) death rate for the year was as in 1971, i.e. Nil per 1,000 population.

NATIONAL ASSISTANCE ACTS, 1948 AND 1951

Removal to suitable premises of Persons in Need of Care and Attention.

It was found necessary to make application in respect of two persons for their compulsory removal to hospital.

SANITARY CIRCUMSTANCES OF THE AREA

The Engineer to the West Shropshire Water Board, Mr. R.A. Woodvine, has kindly supplied the following information on the water supply of the town, accompanied by statistics of laboratory examinations carried out at Shelton Waterworks.

"The Board's Shelton Headworks have supplied the whole of the Borough's requirements, free of all restrictions, during the year 1972. The average daily quantity supplied amounted to 3,018,600 gallons, which was equivalent to 53.26 gallons per head per day, and maximum daily quantity supplied was 4,370,600 gallons on 29th February 1972.

Routine chemical and bacteriological analyses were carried out at Shelton on the water before and after treatment. The maximum and minimum results obtained from these examinations are given in the accompanying table.

During the year the practice of making routine chemical and bacteriological examinations of drinking water samples drawn from household supplies was maintained, 297 chemical and 381 bacteriological examinations were made from such samples, and all were found to be sterile. The water supply in general has consistently maintained the very high standard of purity demanded for water supplies in this country.

The reconstructed works at Shelton operated very satisfactorily during the year under review. There were some minor teething troubles, but no real difficulties were experienced in operating the fully automated treatment plant. The capacity of the works is now four times as great as hitherto, although only the same number of men are required to operate the equipment.

In the early part of the year it was anticipated that some difficulties would be experienced due to the Power Supplies crisis, and two generators were borrowed from the Ministry of the Environment for standby power to operate the pumps. The interruption of the electricity supplies, however, did nto prevent the continuity of water supplies to consumers.

The costs of electricity resulting from being unable to operate pumps at the off-peak periods, would have been extremely large, but an application was made to the Chairman of the Midlands Electricity Board, and he very kindly decided that no extra charges would be made for electricity used outside the negotiated periods during the crisis.

The laying of the Western Trunk Main by the Board's direct labour force continued during the year, and approximately 92% of the work had been completed. This will be the last portion of the Trunk Ring Main system encircling the Borough, and will assist the balancing of supplies, especially in the Harlescott area.

Mr. J.H. Sabido retired as Engineer to the Board at the end of August 1972. Mr. Sabido was formerly the Borough Water Engineer from 1951 to 1964 before becoming Engineer to the Board.

A number of mains extensions and renewals were carried out comprising:

	2,580 yards	3" diameter
	1,446 yards	4" diameter
	946 yards	6" diameter
	232 yards	12" diameter
	555 yards	16" diameter
	665 yards	20" diameter
	732 yards	22" diameter
Total	7,156 yards	i.e. approximately 4.06 miles.

The following number of communication pipes were connected to the Borough mains:

	345 No.	½" diameter
	47 No.	¾" diameter
	15 No.	1" diameter
	5 No.	above 1" diameter
Total	412 No.	

Monitoring for the estimation of radio activity in the air, river water and final water, was continued during the year. The results obtained to date are within the accepted standards as laid down by the National Research Council."

Fluoride

The average fluoride content of the town's treated water is estimated to be 0.03 mg/1.

The position as regards dwellinghouses in the town as at the end of 1972 is as follows:

Total number of houses	19,779
Total number of houses with Corporation piped water supply	19,765
Total number of houses without a Corporation piped water supply	14

RESULTS OF CHEMICAL AND BACTERIOLOGICAL EXAMINATIONS 1972

	ITEM	RIVER WATER UNTREATED		WATER AFTER FILTRATION AND STERLISATION	
		Maximum	Minimum	Maximum	Minimum
Bacteriological	Probable number of coliform Aerogenes Organisms per 100 mls.	180+	180+	NIL	NIL
	Probable number of Bact. Coli Type 1 per 100 mls.	180+	180+	NIL	NIL
	Colony count per ml. at 37^{o}C.	–	–	NIL	NIL
Chemical Analysis expressed in Milligrams per Litre	Colour (Hazenscale)	129	5	NIL	NIL
	pH	8.40	7.25	9.50	7.30
	Alkalinity ($CaCO_3$)	111	27	125	25
	Chloride (Cl)	42	12	48	18
	Free and Saline Amonia	0.83	0.04	NIL	NIL
	Oxygen absorbed (3hrs. at 37^{o}C)	9.52	0.68	1.32	NIL
	Permanent Hardness ($CaCO_3$)	58	3	102	18
	Total Hardness ($CaCO_3$)	137	54	170	74
	Free Residual Chlorine	–	–	0.20	NIL
	Total Residual Chlorine	–	–	0.30	0.10

PUBLIC BATHS

The Swimming Pool Complex (a more up-to-date title than Public Baths) continued to give good service to the inhabitants of Shrewsbury and a wide surrounding area. During the year many galas and other competitions are held and facilities are made available for the Duke of Edinburgh Award training, personal survival exercises, life saving and under-water swimming. Each side of the baths now has a 'Minute Man' type of artificial respirator available for emergency and the staff have been instructed on safety and rescue procedures with the addition of lectures by a Consultant Anaesthetist on the techniques involved.

With the fairly high turnover and the various types of use it is very essential that the bacteriological purity of the water is maintained, and this year more samples have been taken than in previous years and, out of 37 samples, only two were considered to be unsatisfactory — in both cases these by coincidence were taken very soon after personal survival exercises had been taking place in the Quarry Pool. The contamination caused by these exercises would be annulled by the chlorination process in use.

Shrewsbury is on a deep, swift flowing river and it is considered essential that as many people as possible should be strong swimmers and the above-mentioned exercises are therefore encouraged.

DRAINAGE, CLOSET ACCOMMODATION, SEWERAGE AND PUBLIC CLEANSING

The Borough Surveyor, Mr. R.W. Gibb, has kindly supplied the following information:

Main Drainage

Number of existing houses connected to sewers ...	10
Number of new houses erected without connection to main sewerage system	Nil

Extensions and Alterations

(a) Surface water sewers constructed in the Castlefields Improvement Area.

(b) Barker Street sewer re-laid.

The present position as regards sewage disposal in the town as estimated during 1972 is as follows:

Total number of houses in the Borough	19,779
Number of houses connected to Corporation sewers ...	19,615
Number of houses connected to independent sewers disposal works, e.g. cesspits, septic tanks ...	136
Number of houses relying on earth, pail or chemical closets	28

Refuse Collection and Disposal

The "paper sack" collection scheme, which commenced in the Harlescott area of the town towards the end of 1971, was extended to cover the whole of the town by August 1972. This allowed the number of collection rounds to be reduced from six to five.

In June 1972, the Nobold Refuse Tip was closed and disposal facilities were provided at Fox Farm, Wenlock Road. This site is organised and run by Atcham R.D.C., with whom disposal facilities are shared. In addition, the container service introduced in 1970 at six amenity sites, where householders are encouraged to deposit garden rubbish, bulky articles and other refuse not usually taken by the refuse collectors, was again made available.

SANITARY INSPECTION OF THE AREA

The Chief Public Health Inspector, Mr. C. Stanley, reports as follows:

Complaints received during the year

There were 417 complaints and these were investigated in accordance with the following analysis:

NATURE OF COMPLAINT	NUMBER RECEIVED
Housing Defects	26
Choked and Defective Drains and Sewers	27
Accumulations of Offensive Matter	5
Relative to Unsound Food	29
Verminous Premises:	
(a) Bugs	Nil
(b) Rats and Mice Infestations	272
(c) Insects	20
Keeping of Animals and Poultry	8
Unsatisfactory Milk Supplies	2
Clean Air Act	7
Noise Abatement Act, 1960	8
Food Hygiene (General) Regulations 1960	Nil
Offices, Shops and Railway Premises Act	1
Miscellaneous	12
TOTAL	417

Premises Inspected

The following summary indicates the number of inspections of various premises carried out during the year:

NATURE OF INSPECTION	Number of visits	Unsatisfactory conditions remedied by verbal cautions
Dwellinghouses, under the Public Health Act	386	8
Business, premises under the Public Health Act	199	1
Dwellinghouses under the Housing Acts	3,234	—
Houses in Multiple Occupation	172	—
Caravans, Control of Development Act, 1960	35	1
Factories Act, 1961:		
Factories with mechanical power	119	2
Factories without mechanical power	7	1
Works of building construction	30	—
Outworkers' premises	—	—
Offices, Shops and Railway Premises Act, 1963:		
Registered Premises	949	31
Non-Registered Premises	61	—
Shops Acts 1950 and 1965	9	—
Food and Drugs Act/Food Hygiene Regulations:		
Bakehouses	64	8
Butchers' Shops	164	18
Hospital Kitchens	10	—

continued .....

NATURE OF INSPECTION	Number of visits	Unsatisfactory conditions remedied by verbal cautions
Food and Drugs Act/Food Hygiene Regs. – cont......		
Restaurant Kitchens	377	54
School Kitchens	45	–
Staff Canteens	14	–
Licensed Premises	81	4
Market Stalls	199	26
Food Vehicles	95	1
Other Premises	623	60
Section 16 Premises – Sausage Manufacturers	33	–
Fish Frying Premises	59	1
Ice Cream Premises	107	5
Unfit meat and other foods	213	–
Sampling of Food and Drugs (other than milk)	45	–
Milk Sampling – Bacteriological	40	–
Chemical	16	–
Food Poisoning Investigations	6	–
Clean Air Acts	457	–
Noise Abatement Act, 1960	169	1
Diseases of Animals (Waste Foods) Order, 1957	3	–
Pet Animals Act, 1951	–	–
Drainage – Inspection and Examination	453	5
Public Sewers	113	–
Septic Tanks and Cesspools	36	–
Watercourses and Ditches	13	–
Land and Tips	54	–
Water Supplies	67	–
Swimming Bath Water Sampling	72	–
Offensive Trades Premises	–	–
Verminous Premises:		
Rats and Mice	389	–
Insects, etc.	381	–
Infectious Disease	18	–
National Assistance Acts	4	–
Agriculture Safety, Health and Welfare Regulations	–	–
Miscellaneous	526	2
TOTAL	10,147	229

Notices Served

Administrative action was taken during the year to secure abatement of nuisances and to enforce the appropriate statutory enactments as follows:

SUBJECT OF NOTICE	Public Health Acts	Housing Acts	Offices, etc. Act	Food and Drugs Act 1955	Factories Act 1961	Shops Act
Number of Informal Notices served	16	–	81	11	4	–
Number of Informal Notices complied with	24	–	38	69	11	–
Number of Informal Notices Outstanding (against Premises)	6	–	43	13	5	–
Number of Statutory Notices served	14	16	–	–	–	–
Number of Statutory Notices complied with	19	17	–	–	–	–
Number of Statutory Notices outstanding (against Premises)	7	13	–	–	–	–
Number of Prosecutions	–	–	1	–	–	–

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Table A—Registrations and General Inspections

(1) Class of Premises	(2) Number of premises registered during the year	(3) Total number of registered premises at end of year	(4) Number of registered premises receiving a general inspection
Offices	22	314	47
Retail Shops	24	410	133
Wholesale Shops, warehouses	5	21	9
Catering establishments open to the public, canteens ...	7	88	88
Fuel storage depots ...	—	—	—
Totals	58	833	277

Table B—Number of Visits of all kinds by Inspectors to Registered Premises

Total 949

Table C—Analysis of Persons Employed in Registered Premises by Workplace

Class of Workplace (2)	Number of persons employed (2)
Offices	4,028
Retail Shops	2,666
Wholesale departments, warehouses	254
Catering establishments open to the public	716
Canteens	54
Fuel storage depots	—
Total	7,718
Total Males	3,383
Total Females	4,335

ANALYSIS OF UNSATISFACTORY CONDITIONS

CONTRAVENTION	1972		1964-1972			
	Found	Remedied	Found	Remedied	Withdrawn	Outstanding
Lack of Cleanliness	85	139	1,401	1,090	277	34
Overcrowding	—	3	71	59	10	2
Absence of Thermometer or Heating Facilities	29	37	670	547	102	21
Inadequate Ventilation	28	54	592	491	79	22
Unsatisfactory Lighting	91	127	924	708	113	103
Inadequate or Unsatisfactory Sanitary Conveniences	59	108	1,548	1,287	226	35
Inadequate or Unsatisfactory Washing Facilities	40	54	1,261	1,077	146	38
Absence of Drinking Water	—	—	43	35	6	2
Inadequate Clothing Accommodation	5	5	226	203	23	—
Unsuitable or Inadequate Seating Facilities	1	8	55	43	5	7
Seats for Sedentary Work	3	8	41	34	6	1
Inadequate Eating Facilities	1	2	25	20	5	—
Defective Floors and Staircases	44	109	1,697	1,430	258	9
Inadequately Fenced Machinery	1	4	80	69	9	2
Dangerous Machinery: Exposure of Young Persons	1	1	1	1	—	—
Hoists and Lifts Regulations	5	10	56	41	11	4
Noise and Vibrations	—	—	3	3	—	—
Dangerous Conditions and Practices	37	122	806	651	119	36
Prohibition of Heavy Work	—	—	1	1	—	—
Absence of Adequate First Aid Facilities	31	38	511	434	65	12
Failure to Notify Fact of Employment of Persons	2	5	74	49	12	13
Absence of Abstract of Act	33	30	544	470	68	6

NOTICES

	1972	1964-1972
Number Served	81	1,483
Number Completed	31	1,263
Number Withdrawn*	7	158
Number Outstanding	43	62

(* i.e. Act ceased to apply)

ACCIDENTS

There were seventeen notifiable accidents reported in Shrewsbury during the year. (An accident becomes notifiable if an employee is fatally injured, or is disabled from doing his or her usual work for more than three days.)

The types of accident reported were as follows:

Cause of Accident	**Number of Cases**
Non-power driven machinery or relevant part in motion	1
Vehicle stationary	1
Use of hand tool	2
Fall on or from fixed stairs...	3
Falls on the same level	2
Stepping on or striking against object or person...	6
Handling goods	1
Struck by falling object	1

Enforcement of the Act would be made more easy if all sections were backed by Statutory standards instead of recommended ones. It is not always easy to enforce such terms as "effective and suitable", "effective provision", "adequate supply" or "suitable and sufficient", in a uniform manner.

One argument against having Statutory standards is that employers generally will meet legal liability but will not improve working conditions beyond that point. The absence of standards, however, produces an opportunity for inspectors to obtain something better.

Some Sections of the Act do have legal standards, and it has been found in practice that they do not limit employers to a mere compliance level.

Useful work is still being done by the Department in our liaison with Architects who have submitted plans of proposed alterations or new work to office and shop premises. Compliance with the Act is achieved more easily and at much less cost when considered at the planning stage.

During the year the Department persuaded a large nationally known firm that their ladies employed at cash checkouts were sedentary workers and therefore entitled to seating facilities in accordance with Section 14 of the Act. The firm's initial reluctance to concede this point can be appreciated when one considers that facilities will now be provided in hundreds of stores throughout the country, in addition to their Shrewsbury branch.

It was found necessary to take legal proceedings in one instance during the year. The contraventions were:

Section 7 – Effective and suitable provision was not made for securing by the circulation of adequate supplies of fresh air or artificially purified air the ventilation of the basement room.

Section 16 – The basement workroom floor was not properly maintained.

The defendants pleaded guilty and were fined £15.00 with £5.00 costs.

There were no complaints or summary applications under the provisions of Section 22, and no interim orders were granted.

There were no exemptions issued during the year, and no exemptions in operation during the year.

Once again, a word of thanks to all the members of my staff for their hard work and team spirit.

SANITARY IMPROVEMENTS EFFECTED AT DWELLINGHOUSES AS A RESULT OF STATUTORY AND INFORMAL NOTICES ISSUED

(Number of premises, 25)

	Number Complied With
Choked Drains	1
Defective Water Closets	4
Defective W.C. Cisterns and Fittings	1
Dampness arising from:	
Defective Roofs	10
Defective Eaves-gutters	5
Defective Downspouts	2
Defective Damp-proof Courses	2
Defective Yard Paving	1
Defective Chimney Flues	1
Defective Window Frames and Sashes	2
Defective Floors	2
Defective Stairs	1
Defective Wall and Ceiling Plaster	4
Accumulation of Manure or Offensive Matter	1
Miscellaneous	6

Destruction of Rats and Mice

At the end of the year the number of premises under contract with the Corporation for disinfestation was as follows:

Business premises	55

Rat infestations at private dwellinghouses are cleared free-of-charge and advice is readily available to occupiers of domestic premises found to be infested by mice.

The Department employs one full-time and one part-time Rodent Operator, and they made 2,676 visits to premises in the course of their duties during the year under review.

In addition, the full-time Rodent Operator was also engaged on pigeon control duties.

FACTORY ACT, 1961

The following statistics, required under the provisions of this legislation, are appended:

Part I of the Act

1. **Inspections** for purposes of provisions as to health (including inspections made by Public Health Inspectors).

PREMISES	Number on Register	Number of Inspections	Number of Written Notices	Number of Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	3	7	–	–
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	231	119	4	–
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	30	30	–	–
TOTAL	264	156	4	–

2. Cases in which **Defects** were found.

PARTICULARS	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7) —					
(a) Insufficient	—	1	—	1	—
(b) Unsuitable or defective	2	9	—	2	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)					—
TOTAL	2	10	—	3	—

Part VIII of the Act

Outwork (Sections 133 and 134)

NATURE OF WORK	Section 133			Section 134		
	Number of out-workers in August list required by Section 133 (1) (c)	Number of cases of default in sending lists to the Council	Number of prosecutions for failure to supply lists	Number of instances of work in unwholesome premises	Notices served	Prosecutions
Assembly & Packing: Plastic Hair Curlers Incontinent Pads	Approximately 130 (one set of premises)	—	—	—	—	—
Packing: Hair Grips Hair Setting Tissue Cards Greetings Cards						
Assembly: Calendars						
Filling Tins with Adhesive						
TOTAL	Approx. 130	—	—	—	—	—

HOUSING

Building Progress During 1972

Houses erected by Local Authority	17)	) 243
Houses erected by Private Enterprise	226)	

Housing Statistics

1. Inspections of Dwellinghouses during the year:

Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	3,275
Number of dwellinghouses (or parts of dwellinghouses) found to be in a state so dangerous or injurious to health as to be unfit for human habitation	4
Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	23

2. Remedy of defects during the year without services of formal notices:

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their offices ...	19

3. Action under Statutory Powers during the year:

(1) Number of dwellinghouses in respect of which Notices were served requiring defects to be remedied	15
(2) Number of dwellinghouses in which defects were remedied after service of Formal Notices:	
(a) By Owners	21
(b) By Local Authority in default of owners	4

Two individual unfit dwellings and two parts of dwellings i.e. underground rooms, considered incapable of repair at reasonable cost, were the subject of a Closing Order during the year.

Twenty-three houses contained within a confirmed Clearance Area were demolished during the year.

MUNICIPAL HOSTEL FOR MEN

This hostel was originally built to house lodgers from common lodging houses cleared during slum clearance in 1937 and caters essentially for working men.

Over the years the average age of the occupants has increased and many of the long-stay occupants have retired.

The charges per week are £3.40 and 65p per night, although these are reviewed periodically in order that the hostel should be practically self-supporting. No grant is asked for from either the Department of Health and Social Security or from the Salop County Council through their Social Services Department.

The high standard of maintenance leads to such comfort for the occupants that many men stay in the hostel for years. The men have the use of cooking facilities, their own food store and the use of dining and reading rooms, and television at 5p per week. The hostel is well heated and lit and cleansed, and clean sheets and pillowcases are supplied on arrival and thereafter at fortnightly intervals. There is one double cubicle and all the rest are single. As in the community in general, the hostel has an ageing population, and a large proportion of the occupants are pensioners, but as the hostel is for working men and staffed accordingly, they have to be independent, able to cook their own meals and look after themselves.

The men are usually asked to register with a local doctor if they are staying for more than a few days, and local doctors have dealt with most of the illness. Arrangements were made for some men who were long stay occupants in a local hospital, but who were fit to be in the community, to live in the hostel and work in the hospital's sheltered workshop. This arrangement which commenced in 1971, continued to be mutually satisfactory.

Although a bed used to be available for one-night callers the number of such persons asking for accommodation has dropped very considerably, and a majority of the single-night lettings have been by previous arrangement, for ex-hospital patients or ex-prisoners.

FOOD AND DRUGS ACT 1955

Inspection and Supervision of Food

Milk Supply

At the close of the year there were registered under the Milk and Dairies Regulations:

Dairies	5
Retail Purveyors of Milk	59

Turbidity Test (applicable to sterilised milk)

The nineteen samples proved satisfactory.

Phosphatase Test (a test applied to verify the efficiency of pasteurisation)

The forty-five samples proved satisfactory.

Methylene Blue Test

Fifty-two samples were subject to the Methylene Blue Test (an indicator of keeping quality), of which two were found to be unsatisfactory.

Ice Cream

Premises registered for sale and manufacture ...	1
Premises registered for sale only	191

Fifty-one samples of ice cream were taken for bacteriological examination. The results are tabulated below:

No. of Samples	Grade 1	Grade 2	Grade 3	Grade 4	Void
51	40	7	1	3	–

Food and Drugs Sampling

The 80 samples of food and drugs submitted to the Public Analyst for analysis comprised 78 foods (9 formal and 69 informal) and 2 drugs (both informal).

Some 78 were returned as genuine and 2(both foods) as not genuine.

An additional 21 informal samples of milk were tested for fat content on the testing machine at the Health Centre. All were found to be satisfactory.

Remarks on Samples Returned as Not Genuine

Confectionery (Toffets)	–	This was an informal sample of sugar confectionery contaminated with mites and undergoing decomposition causing the fat to be rancid. (Warning letter sent to vendor.)
Rhubarb (Tinned)	–	This was an informal sample of tinned rhubarb grossly contaminated with mould. (The tin was found to be defective and the complaint was referred to the manufacturer for investigation.)

Food Hygiene (General) Regulations, 1960

	No. of Premises	No. fitted to comply with Regulation 16	No. to which Regulation 19 applies	No. fitted to comply with Regulation 19
Bakehouses	4	4	4	4
Butchers'	29	29	29	29
Bread and Confectionery	11	11	11	11
Fish Frying Premises	14	14	14	14
Grocers	66	66	66	66
Greengrocers	15	15	15	15
Hospital Kitchens	7	7	7	7
Ice Cream Manufacturers	1	1	1	1
Licensed Premises (including those supplying light refreshements)	109	109	109	109
Restaurant/Cafe Kitchens	47	47	47	47
Chinese 'Take Away' Kitchens	3	3	3	3
School Canteens	32	32	32	32
Staff Canteens	17	17	17	17
Supermarkets	12	12	12	12
Sweet Confectionery	40	40	10	10
Warehouses	7	7	7	7
Wet Fish	6	6	6	6
Meat Processing	1	1	1	1
Poultry Processing	2	2	2	2

Regulation 16 refers to the provision of suitable and sufficient wash-hand basins, and adequate supply of hot and cold water, soap, nail-brushes and drying facilities for the use of all persons engaged in the handling of food.

Regulation 19 relates to the provision of suitable and sufficient sinks, or other facilities, for washing food and equipment. The appropriate water supply must be provided in each instance.

Poultry Inspection

Number of poultry processing premises within the district	2
Number of visits to these premises	20

Type of Birds Processed	Number Processed	Percentage Rejected as unfit for human consumption	Weight Condemned as unfit for human consumption
Turkeys	138	—	—
Ducks	187	—	—
Chickens	1,986	1.07	51 lbs.
Broilers	274	—	—
Geese	32	—	—
Guinea Fowl	24	—	—

The inspection of these premises is carried out under the provisions of the Food Hygiene (General) Regulations. There is also a Code of Practice which outlines the structural requirements and hygienic standards recommended in this type of business. In addition, the Food and Drugs Act, 1955, applies to the examination of poultry.

Unsoundness is poultry was again found to be relatively small.

The Liquid Egg (Pasteurisation) Regulations, 1963

Number of egg pasteurisation plants in district ... Nil

The following foodstuffs, being unfit for human consumption, were voluntarily surrendered for destruction:

Bacon and Ham	... 1,420 lbs.
Beef	... 505 lbs.
Bananas	... 796 lbs.
Cheese	... 80 lbs.
Chickens	... 122 No.
Fish	... 14 lbs.
Lamb	... 38 lbs.
Pork	... 432 lbs.
Preserved Goods ...	... 5,837 tins, jars or packets.
Tomatoes	... 609 boxes.
Turkeys	... 34 No.

PUBLIC ABATTOIR

1972 has been another year of increasing throughput, which in itself proves that Shrewsbury Abattoir is providing a substantial service to the community in meat production and adding to its stature among the big abattoirs of the country.

New Equipment

A new piece of equipment was installed in June, namely the Hide Stripper. A similar piece of machinery was seen by the Chairman, Abattoir Superintendent and Mr. D. Dale of the Borough Surveyor's Department, prior to its purchase and installation.

The installation of the hide stripper as well as other less costly pieces of equipment during the year was forced upon us by standards in handling and hygiene and by the need always to go forward instead of standing still.

The hide stripper allows for a cleaner and more hygienic dressing of cattle, with more room to operate where space was a limiting factor.

The quality of dressing was improved and the hides which were hitherto mainly third class were now mainly first class, with an equal difference in economic returns to the wholesalers as a result.

Less men could now operate the line at a constant speed where hitherto even the absence of one man meant slowing down the production and a lowering in standards.

Future Improvements

Now that the production part of the Abattoir is running smoothly, it provides a challenge and a necessity to ensure that holding for livestock, space for hanging carcases, with appropriate chilling and cutting-up rooms and the replacement of temporary refrigeration and other accommodation with suitable modern permanent facilities, to make the body work of the car match the ability of the engine.

By-products facilities are also very severely cramped and in order to obtain maximum return for it in the increasing demand for pet food manufacture, inedible material should be separated, sorted, washed, packed and frozen in suitable premises, requiring space and facilities for the work, and this we are very short of at Shrewsbury.

Policy

A meeting took place in February at the Abattoir between the Abattoir Superintendent and the National Farmers Union concerning the problem, which is national as well as local, of dirty sheep coming in for slaughter. These sheep are dirty as a result of root feeding in the winter in ploughed fields and the result is that the slaughtermen are covered in mud and clay when dressing them, whilst one cannot get the stains washed off the carcase. Unfortunately, even with the sympathy of the National Farmers Union, only little progress was made.

A strong lobby for the prohibition of live sheep exports which locally was very active, gained momentum during the year. If this prohibition was achieved, the slaughtering and export of carcases from export abattoirs would be increased.

In mid-summer Ross Foods Limited took control of Leanstock Limited from the Heinz Group of Companies and the Abattoir staff had once again to learn to live with, and influence, a new Company, whose ideas on meat marketing were not quite similar to the previous occupiers of the factory, but whose business at the Abattoir accounted for between 60% and 70% of the throughput.

Meat inspection standards were criticised by the Ministry of Agriculture, Fisheries and Food at national level for not conforming more strictly to the Meat Inspection Regulations and as a result meetings were held at branch level by the Public Health Inspectors Association to make comment on the difficulties of the inspection deficiencies and advice for future procedures.

In Shrewsbury Abattoir the Ministry are concerned with the continued meat inspection standard as well as export standards in hygiene and handling and made it plain that no less a standard than that which operates during their visit will be accepted and have similarly made it plain that the standard must be maintained regardless of absence through sickness or holidays of inspectors.

Detailed investigations were made by the Abattoir Sub-Committee during the year on the function and economics of the Abattoir. The object of the exercise was to find out the standing of the Abattoir in the Meat Trade and whether it might be a more attractive proposition to the town that the Abattoir should be run by private enterprise. It was subsequently proposed to advertise it for lease.

The following table gives the information for the year in relation to the number of carcases inspected for human consumption or rejected as unfit.

CARCASES INSPECTED AND CONDEMNED

(Figures in brackets are for 1971)

	Cattle	Calves	Sheep and Lambs	Pigs	Horses
Number killed	35,493 (30,514)	279 (704)	149,339 (96,153)	89,719 (66,461)	– (–)
Number inspected	35,493 (30,514)	279 (704)	149,339 (96,153)	89,719 (66,461)	– (–)
All Diseases except Tuberculosis and Cysticerci:					
Whole carcases condemned	19 (7)	35 (44)	74 (37)	81 (131)	– (–)
Carcases of which some part or organ was condemned	8,325 (7,656)	35 (50)	6,426 (3,368)	7,593 (7,018)	– (–)
Percentage of the number inspected affected with disease other than tuberculosis	23.45% (25.09%)	11.47% (7.10%)	4.30% (3.50%)	8.46% (10.56%)	– (–)
Tuberculosis only:					
Whole carcases condemned	– (–)	– (–)	– (–)	3 (1)	– (–)
Carcases of which some part or organ was condemned	– (–)	– (–)	– (–)	129 (201)	– (–)
Percentage of the number inspected affected with tuberculosis	– (–)	– (–)	– (–)	0.14% (0.39%)	– (–)
Cysticercosis:					
Carcases of which some part or organ was condemned	20 (67)	– (–)	– (–)	– (–)	– (–)
Carcases submitted for treatment by refrigeration	11 (22)	– (–)	– (–)	– (–)	– (–)
Generalised and totally condemned	– (–)	– (–)	– (–)	– (–)	– (–)

Diseased and unsound conditions found in the animals dealt with caused the detention and surrender for destruction of a total weight in carcase meat and offal of 89 tons. 9 cwts 97 lbs., details as follows:

Carcase Meat	16 tons. 10 cwts. 79 lbs.
Offal	72 tons. 19 cwts. 18 lbs.

Unsound Food

The following meat and offal, being unfit for human consumption, was voluntarily surrendered for destruction:

Home killed meat	17 cwts. 101 lbs.
Irish Chilled Beef	1 ton. 19 cwts. 48 lbs.
Frozen Beef	24lbs.
Frozen Lamb	17 lbs.
Frozen Lambs Liver	1 cwt. 20 lbs.
Frozen Pigs Liver	53 lbs.

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